## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10084640

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                                       |                      |                              |                  | SMALL ENTITY TYPE |                             | ΛP | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|---|--|---|---------------------------------------|----------------------|------------------------------|------------------|-------------------|-----------------------------|----|-------------------------------|------------------------|--|
| TOTAL CLAIMS  |  |   | 7                                     |                      |                              |                  | RATE              | FEE                         | 1  | RATE                          | FEE                    |  |
| FOR   |  |   | NUMBER FILED                          |                      | NUMB                         | ER EXTRA         | BASIC FE          |                             | OR | BASIC FEE                     | 740.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | ② 0 minus 20=                         |                      | * J.                         |                  | X\$ 9=            |                             | OR | X\$18=                        |                        |  |
| INDEPENDENT CLAIMS  |  |   | 4 minus 3 =                           |                      | * /                          |                  | X42=              | 1                           | OR | X84=                          |                        |  |
| ML  | ILTIPLE DEPEN  | IDENT CLAIM PI                            | RESENT                                |                      |                              |                  | +140=             |                             | OR | +280=                         |                        |  |
| * If  | the difference   | in column 1 is                            | less than zero, enter "0" in column 2 |                      |                              | olumn 2          | TOTAL             |                             | OR | TOTAL                         |                        |  |
|   | C  | LAIMS AS A                                | MENDED - PART II                      |                      |                              |                  | SMALL ENTITY      |                             |    | OTHER THAN                    |                        |  |
| _   | T  | (Column 1)<br>CLAIMS                      | 5.33                                  | (Column 2)           |                              | (Column 3)       | SMALI             |                             | OR | SMALL                         | ENTITY                 |  |
| <b>AMENDMENT A</b>  |  | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUM<br>PREVI         | BER<br>OUSLY<br>FOR          | PRESENT<br>EXTRA | RATE              | ADDI-<br>TIONAL<br>FEE      |    | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus                                 | **                   |                              | =                | X\$ 9=            |                             | OR | X\$18=                        | L                      |  |
| AME   | Independent  | * NTATION OF MI                           | Minus                                 | ***                  | T CLAIM                      | =                | X42=              |                             | OR | X84=                          | ,                      |  |
| <u> </u>  | 7 11 10 1 11 12 2  |   | JETH LE DE                            | LINDLIN              | CEANN                        |                  | +140=             |                             | OR | +280=                         |                        |  |
|   |  |   |                                       |                      |                              |                  | TOTA              |                             | OR | TOTAL<br>ADDIT. FEE           |                        |  |
|   |  | (Column 1)                                |                                       | (Colu                | mn 2)                        | (Column 3)       | ADDIT. FE         | - <del>ليــــــــــــ</del> | j  | ADDIT. FEE                    |                        |  |
| ENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HİĞI<br>NUM<br>PREVI | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | RATE              | ADDI-<br>TIONAL<br>FEE      |    | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| NON   | Total  | *   | Minus                                 | **                   |                              | =                | X\$ 9=            |                             | OR | X\$18=                        |                        |  |
| AMENDMENT   | Independent  | *   | Minus                                 | ***                  |                              | =                | X42=              | <del>-</del>                | OR | X84=                          |                        |  |
| L   | FIRST PRESE  | NTATION OF MI                             | JLTIPLE DEP                           | 'ENDEN'              | T CLAIM                      |                  | +140=             | <u> </u>                    | OR | +280=                         |                        |  |
|   | TOTAL  |   |                                       |                      |                              |                  |                   |                             | -{ | TOTAL                         |                        |  |
|   | ADDIT. FEE   |   |                                       |                      |                              |                  |                   |                             | OR | ADDIT. FEE                    | L                      |  |
| _   |  | (Column 1)<br>CLAIMS                      |                                       |                      | mn 2)                        | (Column 3)       |                   |                             | _  |                               |                        |  |
| AMENDMENT C   |  | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUM<br>PREVI         | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | RATE              | ADDI-<br>TIONAL<br>FEE      |    | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| NDN   | Total  | *   | Minus                                 | **                   |                              | 5                | X\$ 9=            |                             | OR | X\$18=                        |                        |  |
| AME   | Independent  | *   | Minus                                 | ***                  | TOLANA                       | =                | X42=              |                             | OR | X84=                          |                        |  |
| <u> </u>  | FINOI PRESE  | NTATION OF M                              | ULTIPLE UEF                           | CNDEN                | CLAIM                        |                  | +140=             |                             | OR | +280=                         |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |  |   |                                       |                      |                              |                  |                   |                             |    |                               |                        |  |
|   | ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE |   |                                       |                      |                              |                  |                   |                             |    |                               |                        |  |